We can provide interpreters for a variety of languages, information in larger print or other formats (e.g. audio) - please call us on 01932 723553.

To use the Text Relay service, prefix all numbers with 18001.

Patient Information

Ultrasound Guided
FNA Breast
Imaging Department

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Further Information
We endeavour to provide an excellent service at all times, but should you have any concerns please, in the first instance, raise these with the Matron, Senior Nurse or Manager on duty.
If they cannot resolve your concern, please contact our Patient Experience Team on 01932 723553 or email asp-tr.patient.advice@nhs.net. If you remain concerned, the team can also advise upon how to make a formal complaint.
Ultrasound Guided Fine Needle Aspiration (FNA) of the Breast

What is fine needle aspiration?

Fine needle aspiration uses a very small needle to extract fluid or cells from an abnormal area in the breast. The sample is then examined under a microscope so that a diagnosis can be made.

FNA may be used to assess an abnormality felt during physical examination or to evaluate an abnormality seen during an ultrasound scan.

Ultrasound is often used to guide the FNA to ensure that the correct area has been sampled.

Preparing for ultrasound guided FNA

There is no specific preparation necessary.

Please inform the Radiologist if you are taking any medication used to thin the blood, such as aspirin or warfarin.

What does ultrasound guided FNA entail?

Before entering the ultrasound room you will be asked to strip from the waist up and put on a gown.
A radiologist (an x-ray doctor) will perform the FNA. A radiographer and/or nurse will also be present during the procedure.

You will be asked to take off your gown and lie on the couch. The radiologist will examine your breast and an ultrasound scan will be performed. Whilst holding the ultrasound probe over the area of concern the radiologist will perform the FNA.

The skin will be cleaned with antiseptic solution. A small needle, (similar to that used to take blood) connected to a syringe, will be inserted into the breast and moved in and out for a few seconds. This will then be removed and some pressure applied to the breast to reduce bruising. The sample obtained from the breast will be spread onto glass slides and sent to the laboratory for analysis.

A small dressing will be applied to the breast.

The process takes 20-30 minutes although the needle is only in the breast for approximately 10 seconds.

What happens after the FNA?

Both the radiology report, and the result of the FNA analysis from the pathology lab, will be sent to your referring doctor. You will need to make an appointment to see your referring doctor to discuss the results. You should allow 7 working days for the pathology report to be available.

Will the FNA hurt?

Most patients tolerate FNA very well and do not find it too painful. You may experience stinging or a stabbing pain during the procedure but this is short-lived. If there is bruising and a hard swelling (haematoma) forms afterwards this may be uncomfortable for a couple of days.

Are there any risks in having breast FNA?

It should be stressed that the answer is generally no. Occasionally there may be some bleeding inside the breast and a bruise or swelling (haematoma) will form.

There is a potential risk of introducing infection and you should contact your referring doctor if you experience redness or heat in the breast after the procedure.